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CONFIRMATION NO. 2839

<b>SERIAL NUMBER</b> 10/761,556	<b>FILING OR 371(c) DATE</b> 01/21/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1639	<b>ATTORNEY DOCKET NO.</b> 09820.168CON
<b>APPLICANTS</b> Samuel H. Gellman, Madison, WI; Bayard R. Huck, Madison, WI;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/883,579 06/18/2001 PAT 6,710,186 which is a CIP of 09/592,756 06/13/2000 PAT 6,727,368 which claims benefit of 60/138,972 06/14/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 04/26/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 14
Verified and Acknowledged Examiner's Signature: [Signature] Initials: [Initials]		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 60961				
<b>TITLE</b> Oligomers and polymers of di-substituted cyclic imino carboxylic acids				
<b>FILING FEE RECEIVED</b> 785	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	